BEFORE THE BOARD OF REGISTERED NURSING DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Case No. 2004-61

Kathleen M. Gonzalez 566 W. Sample Avenue Fresno, CA 93704

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Registered Nurse License No. 443873

Respondent

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Board of Registered Nursing, Department of Consumer Affairs, as it's Decision in the above entitled matter.

This Decision shall become effective on December 17, 2004.

IT IS SO ORDERED November 17, 2004.

President

Board of Registered Nursing
Department of Consumer Affairs

andra L. Erickson

State of California

1	BILL LOCKYER, Attorney General of the State of California			
2	JESSICA M. AMGWERD, State Bar No. 155757			
3	Deputy Attorney General California Department of Justice			
4	1300 I Street, Suite 125 P.O. Box 944255			
5	Sacramento, CA 94244-2550 Telephone: (916) 445-7376 Facsimile: (916) 327-8643			
6				
7	Attorneys for Complainant	•		
8	DEPARTMENT OF CONSUMER AFFAIRS			
9				
	STATE OF CALIFORNIA			
10 11	In the Matter of the Accusation Against:	Case No. 2004-61		
12	KATHLEEN M. GONZALEZ	OAH No. N-2003120190		
	566 W. Sample Avenue Fresno, California 93704	STIPULATED SETTLEMENT AND		
13	Registered Nurse License No. 443873	DISCIPLINARY ORDER		
14				
15	Respondent.	•		
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17	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the			
18	above-entitled proceedings that the following matters are true:			
19	PARTIES			
20	1. Complainant Ruth Ann Terry, M.P.H., R.N., is the Executive Officer of			
21	the Board of Registered Nursing. She brought this action solely in her official capacity and is			
22	represented in this matter by Bill Lockyer, Attorney General of the State of California, by Jessica			
23	M. Amgwerd, Deputy Attorney General.			
24	2. Respondent Kathleen M. Gonz	zalez is represented in this proceeding by		
25	attorney Jeffrey S. Kravitz, whose address is 2728 J Street, Suite 204, Sacramento, California			
26	95816.	•		
27	3. On or about August 31, 1989,	the Board of Registered Nursing issued		
28	Registered Nurse License No. 443873 to Kathleen M	I. Gonzalez (Respondent).		

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JURISDICTION

4. Accusation No. 2004-61 was filed before the Board of Registered Nursing (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on September 11, 2003. Respondent timely filed her Notice of Defense contesting the Accusation. A copy of Accusation No. 2004-61 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 2004-61. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 6. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to be represented by counsel at her own expense; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

- 8. Respondent admits the truth of each and every charge and allegation in Accusation No. 2004-61.
- 9. Respondent agrees that her Registered Nurse License is subject to discipline and she agrees to be bound by the Board of Registered Nursing's imposition of discipline as set forth in the Disciplinary Order below.

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RESERVATION

10. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Board of Registered Nursing or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

CONTINGENCY

- Nursing. Respondent understands and agrees that counsel for Complainant and the staff of the Board of Registered Nursing may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or her counsel. By signing the stipulation, Respondent understands and agrees that she may not withdraw her agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.
- 12. The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.
- 13. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Registered Nurse License No. 443873 issued to Respondent Kathleen M. Gonzalez (Respondent) is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions.

Severability Clause. Each condition of probation contained herein is a separate and distinct condition. If any condition of this Order, or any application thereof, is declared

unenforceable in whole, in part, or to any extent, the remainder of this Order, and all other applications thereof, shall not be affected. Each condition of this Order shall separately be valid and enforceable to the fullest extent permitted by law.

1. Obey All Laws. Respondent shall obey all federal, state and local laws. A full and detailed account of any and all violations of law shall be reported by Respondent to the Board in writing within seventy-two (72) hours of occurrence. To permit monitoring of compliance with this condition, Respondent shall submit completed fingerprint forms and fingerprint fees within 45 days of the effective date of the decision, unless previously submitted as part of the licensure application process.

Criminal Court Orders: If Respondent is under criminal court orders, including probation or parole, and the order is violated, this shall be deemed a violation of these probation conditions, and may result in the filing of an accusation and/or petition to revoke probation.

2. Comply with the Board's Probation Program. Respondent shall fully comply with the conditions of the Probation Program established by the Board and cooperate with representatives of the Board in its monitoring and investigation of the Respondent's compliance with the Board's Probation Program. Respondent shall inform the Board in writing within no more than 15 days of any address change and shall at all times maintain an active, current license status with the Board, including during any period of suspension.

Upon successful completion of probation, Respondent's license shall be fully restored.

- 3. **Report in Person.** Respondent, during the period of probation, shall appear in person at interviews/meetings as directed by the Board or its designated representatives.
- 4. Residency, Practice, or Licensure Outside of State. Periods of residency or practice as a registered nurse outside of California shall not apply toward a reduction of this probation time period. Respondent's probation is tolled, if and when she resides outside of California. Respondent must provide written notice to the Board within 15 days of any change

of residency or practice outside the state, and within 30 days prior to re-establishing residency or returning to practice in this state.

Respondent shall provide a list of all states and territories where she has ever been licensed as a registered nurse, vocational nurse, or practical nurse. Respondent shall further provide information regarding the status of each license and any changes in such license status during the term of probation. Respondent shall inform the Board if she applies for or obtains a new nursing license during the term of probation.

5. Submit Written Reports. Respondent, during the period of probation, shall submit or cause to be submitted such written reports/declarations and verification of actions under penalty of perjury, as required by the Board. These reports/declarations shall contain statements relative to Respondent's compliance with all the conditions of the Board's Probation Program. Respondent shall immediately execute all release of information forms as may be required by the Board or its representatives.

Respondent shall provide a copy of this Decision to the nursing regulatory agency in every state and territory in which she has a registered nurse license.

6. Function as a Registered Nurse. Respondent, during the period of probation, shall engage in the practice of registered nursing in California for a minimum of 24 hours per week for 6 consecutive months or as determined by the Board.

For purposes of compliance with the section, "engage in the practice of registered nursing" may include, when approved by the Board, volunteer work as a registered nurse, or work in any non-direct patient care position that requires licensure as a registered nurse.

The Board may require that advanced practice nurses engage in advanced practice nursing for a minimum of 24 hours per week for 6 consecutive months or as determined by the Board.

If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of Respondent's probation period up to one year without further hearing in

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order to comply with this condition. During the one year extension, all original conditions of probation shall apply.

7. Employment Approval and Reporting Requirements. Respondent shall obtain prior approval from the Board before commencing or continuing any employment, paid or voluntary, as a registered nurse. Respondent shall cause to be submitted to the Board all performance evaluations and other employment related reports as a registered nurse upon request of the Board.

Respondent shall provide a copy of this Decision to her employer and immediate supervisors prior to commencement of any nursing or other health care related employment.

In addition to the above, Respondent shall notify the Board in writing within seventy-two (72) hours after she obtains any nursing or other health care related employment. Respondent shall notify the Board in writing within seventy-two (72) hours after she is terminated or separated, regardless of cause, from any nursing, or other health care related employment with a full explanation of the circumstances surrounding the termination or separation.

8. **Supervision.** Respondent shall obtain prior approval from the Board regarding Respondent's level of supervision and/or collaboration before commencing or continuing any employment as a registered nurse, or education and training that includes patient care.

Respondent shall practice only under the direct supervision of a registered nurse in good standing (no current discipline) with the Board of Registered Nursing, unless alternative methods of supervision and/or collaboration (e.g., with an advanced practice nurse or physician) are approved.

Respondent's level of supervision and/or collaboration may include, but is not limited to the following:

(a) Maximum - The individual providing supervision and/or collaboration is present in the patient care area or in any other work setting at all times.

- (b). Moderate The individual providing supervision and/or collaboration is in the patient care unit or in any other work setting at least half the hours Respondent works.
- (c) Minimum The individual providing supervision and/or collaboration has person-to-person communication with Respondent at least twice during each shift worked.
- (d) Home Health Care If Respondent is approved to work in the home health care setting, the individual providing supervision and/or collaboration shall have person-to-person communication with Respondent as required by the Board each work day. Respondent shall maintain telephone or other telecommunication contact with the individual providing supervision and/or collaboration as required by the Board during each work day. The individual providing supervision and/or collaboration shall conduct, as required by the Board, periodic, on-site visits to patients' homes visited by Respondent with or without Respondent present.
- 9. **Employment Limitations.** Respondent shall not work for a nurse's registry, in any private duty position as a registered nurse, a temporary nurse placement agency, a traveling nurse, or for an in-house nursing pool.

Respondent shall not work for a licensed home health agency as a visiting nurse unless the registered nursing supervision and other protections for home visits have been approved by the Board. Respondent shall not work in any other registered nursing occupation where home visits are required.

Respondent shall not work in any health care setting as a supervisor of registered nurses. The Board may additionally restrict Respondent from supervising licensed vocational nurses and/or unlicensed assistive personnel on a case-by-case basis.

Respondent shall not work as a faculty member in an approved school of nursing or as an instructor in a Board approved continuing education program.

Respondent shall work only on a regularly assigned, identified and predetermined worksite(s) and shall not work in a float capacity.

If Respondent is working or intends to work in excess of 40 hours per week, the Board may request documentation to determine whether there should be restrictions on the hours of work.

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10. Complete a Nursing Course(s). Respondent, at her own expense, shall enroll and successfully complete a course(s) relevant to the practice of registered nursing no later than six months prior to the end of her probationary term.

Respondent shall obtain prior approval from the Board before enrolling in the course(s). Respondent shall submit to the Board the original transcripts or certificates of completion for the above required course(s). The Board shall return the original documents to Respondent after photocopying them for its records.

11. **Cost Recovery.** Respondent shall pay to the Board costs associated with its investigation and enforcement pursuant to Business and Professions Code section 125.3 in the amount of Three Thousand Five Hundred Dollars (\$3,500). Respondent shall be permitted to pay these costs in a payment plan approved by the Board, with payments to be completed no later than three months prior to the end of the probation term.

If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation will apply.

12. Violation of Probation. If Respondent violates the conditions of her probation, the Board after giving Respondent notice and an opportunity to be heard, may set aside the stay order and impose the stayed discipline (revocation/suspension) of Respondent's license.

If during the period of probation, an accusation or petition to revoke probation has been filed against Respondent's license or the Attorney General's Office has been requested to prepare an accusation or petition to revoke probation against Respondent's license, the probationary period shall automatically be extended and shall not expire until the accusation or petition has been acted upon by the Board.

practicing due to retirement, health reasons or is otherwise unable to satisfy the conditions of probation, Respondent may surrender her license to the Board. The Board reserves the right to evaluate Respondent's request and to exercise its discretion whether to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances, without further hearing. Upon formal acceptance of the tendered license and wall certificate, Respondent will no longer be subject to the conditions of probation.

Surrender of Respondent's license shall be considered a disciplinary action and shall become a part of Respondent's license history with the Board. A registered nurse whose license has been surrendered may petition the Board for reinstatement no sooner than the following minimum periods from the effective date of the disciplinary decision:

- (1) Two years for reinstatement of a license that was surrendered for any reason other than a mental or physical illness; or
 - (2) One year for a license surrendered for a mental or physical illness.
- 14. **Physical Examination.** Within 45 days of the effective date of this Decision, Respondent, at her expense, shall have a licensed physician, nurse practitioner, or physician assistant, who is approved by the Board before the assessment is performed, submit an assessment of the Respondent's physical condition and capability to perform the duties of a registered nurse, including a determination as set forth below in Condition 16, "Rule-Out Substance Abuse Assessment." Such an assessment shall be submitted in a format acceptable to the Board. If medically determined, a recommended treatment program will be instituted and followed by the Respondent with the physician, nurse practitioner, or physician assistant providing written reports to the Board on forms provided by the Board.

If Respondent is determined to be unable to practice safely as a registered nurse, the licensed physician, nurse practitioner, or physician assistant making this determination shall immediately notify the Board and Respondent by telephone, and the Board shall request that the Attorney General's office prepare an accusation or petition to revoke probation. Respondent shall immediately cease practice and shall not resume practice until notified by the Board.

During this period of suspension, Respondent shall not engage in any practice for which a license issued by the Board is required until the Board has notified Respondent that a medical determination permits Respondent to resume practice. This period of suspension will not apply to the reduction of this probationary time period.

If Respondent fails to have the above assessment submitted to the Board within the 45-day requirement, Respondent shall immediately cease practice and shall not resume practice until notified by the Board. This period of suspension will not apply to the reduction of this probationary time period. The Board may waive or postpone this suspension only if significant, documented evidence of mitigation is provided. Such evidence must establish good faith efforts by Respondent to obtain the assessment, and a specific date for compliance must be provided. Only one such waiver or extension may be permitted.

15. **Mental Health Examination.** The Respondent shall, within 45 days of the effective date of this decision, have a mental health examination including psychological testing as appropriate to determine her capability to perform the duties of a registered nurse, including a determination as set forth below in Condition 16, "Rule-Out Substance abuse Assessment." The examination must be performed by a licensed psychiatrist, psychologist or other mental health practitioner, approved by the Board. The examining mental health practitioner will submit a written report of that assessment and recommendations to the Board. All costs are the responsibility of the respondent. Recommendations for treatment, therapy or counseling made as a result of the mental health examination will be instituted and followed by the respondent.

If respondent is determined to be unable to practice safely as a registered nurse, the licensed mental health care practitioner making this determination shall immediately notify the Board and respondent by telephone, and the Board shall request that the Attorney General's office prepare an accusation or petition to revoke probation. Respondent shall immediately cease practice and may not resume practice until notified by the Board. During this period of suspension, respondent shall not engage in any practice for which a license issued by the Board is required, until the Board has notified respondent that a mental health determination permits

respondent to resume practice. This period of suspension will not apply to the reduction of this probationary time period.

If the respondent fails to have the above assessment submitted to the Board within the 45-day requirement, respondent shall immediately cease practice and shall not resume practice until notified by the Board. This period of suspension will not apply to the reduction of this probationary time period. The Board may waive or postpone this suspension only if significant, documented evidence of mitigation is provided. Such evidence must establish good faith efforts by the respondent to obtain the assessment, and a specific date for compliance must be provided. Only one such waiver or extension may be permitted.

16. Rule-Out Substance Abuse Assessment--If the examiner conducting the physical and/or mental health examination determines that the respondent is dependent upon drugs or alcohol, or has had problems with drugs or alcohol (i.e. drug dependence in remission or alcohol dependence in remission), that might reasonably affect the safe practice of nursing, then the respondent must further comply with the following additional terms and conditions of probation.

(A) <u>PARTICIPATE IN TREATMENT/REHABILITATION PROGRAM FOR CHEMICAL</u>

DEPENDENCE - Respondent, at his/her expense, shall successfully complete during the probationary period or shall have successfully completed prior to commencement of probation a Board-approved treatment/rehabilitation program of at least six months duration. As required, reports shall be submitted by the program on forms provided by the Board. If respondent has not completed a Board-approved treatment/rehabilitation program prior to commencement of probation, respondent, within 45 days from the effective date of the decision, shall be enrolled in a program. If a program is not successfully completed within the first nine months of probation, the Board shall consider respondent in violation of probation.

Based on Board recommendation, each week respondent shall be required to attend at least one, but no more than five 12-step recovery meetings or equivalent (e.g., Narcotics Anonymous, Alcoholics Anonymous, etc.) and a nurse support group as approved and directed by the Board. If a nurse support group is not available, an additional 12-step meeting or equivalent shall be

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added. Respondent shall submit dated and signed documentation confirming such attendance to the Board during the entire period of probation. Respondent shall continue with the recovery plan recommended by the treatment/rehabilitation program or a licensed mental health examiner and/or other ongoing recovery groups.

(B) ABSTAIN FROM USE OF PSYCHOTROPIC (MOOD-ALTERING) DRUGS

-Respondent shall completely abstain from the possession, injection or consumption by any route of all psychotropic (mood altering) drugs, including alcohol, except when the same are ordered by a health care professional legally authorized to do so as part of documented medical treatment. Respondent shall have sent to the Board, in writing and within fourteen (14) days, by the prescribing health professional, a report identifying the medication, dosage, the date the medication was prescribed, the respondent's prognosis, the date the medication will no longer be required, and the effect on the recovery plan, if appropriate. Respondent shall identify for the Board a single physician, nurse practitioner or physician assistant who shall be aware of respondent 's history of substance abuse and will coordinate and monitor any prescriptions for respondent for dangerous drugs, controlled substances or mood-altering drugs. The coordinating physician, nurse practitioner, or physician assistant shall report to the Board on a quarterly basis respondent's compliance with this condition. If any substances considered addictive have been prescribed, the report shall identify a program for the time limited use of any such substances. The Board may require the single coordinating physician, nurse practitioner, or physician assistant to be a specialist in addictive medicine, or to consult with a specialist in addictive medicine.

(C) <u>SUBMIT TO TESTS AND SAMPLES</u> - Respondent, at her expense, shall participate in a random, biological fluid testing or a drug screening program which the Board approves. The length of time and frequency will be subject to approval by the Board. The respondent is responsible for keeping the Board informed of respondent's current telephone number at all times. Respondent shall also ensure that messages may be left at the telephone number when she is not available and ensure that reports are submitted directly by the testing agency to the Board,

1 as directed. Any confirmed positive finding shall be reported immediately to the Board by the 2 program and the respondent shall be considered in violation of probation. 3 In addition, respondent, at any time during the period of probation, shall fully cooperate with the 4 Board or any of its representatives, and shall, when requested, submit to such tests and samples 5 as the Board or its representatives may require for the detection of alcohol, narcotics, hypnotics, 6 dangerous drugs, or other controlled substances. 7 If respondent has a positive drug screen for any substance not legally authorized and not reported 8 to the coordinating physician, nurse practitioner, or physician assistant, and the Board files a 9 petition to revoke probation or an accusation, the Board may suspend respondent from practice 10 pending the final decision on the petition to revoke probation or the accusation. This period of 11 suspension will not apply to the reduction of this probationary time period. 12 If respondent fails to participate in a random, biological fluid testing or drug screening program 13 within the specified time frame, the respondent shall immediately cease practice and shall not 14 resume practice until notified by the Board. After taking into account documented evidence of 15 mitigation, if the Board files a petition to revoke probation or an accusation, the Board may 16 suspend respondent from practice pending the final decision on the petition to revoke probation 17 or the accusation. This period of suspension will not apply to the reduction of this probationary 18 time period. 19 (D) THERAPY OR COUNSELING PROGRAM - Respondent, at her expense, shall 20 participate in an on-going counseling program until such time as the Board releases her from this 21 requirement and only upon the recommendation of the counselor. Written progress reports from the counselor will be required at various intervals. 22 23 /// 24 /// 25 /// 26 /// 27 ///

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2	participate in an on-going counseling program until such time as the Board releases her from this		
3	requirement and only upon the recommendation of the counselor. Written progress reports from		
4	the counselor will be required at various intervals.		
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7	<i>///</i>		
3	<i>///</i>		
7	<i>///</i>		
)	<i>///</i>		
1	<u>ACCEPTANCE</u>		
2	I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully		
3	discussed it with my attorney, Jeffrey S. Kravitz. I understand the stipulation and the effect it will		
	have on my Registered Nurse License. I enter into this Stipulated Settlement and Disciplinary Order		
5	voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the		
5	Board of Registered Nursing.		
7	DATED: $7 - 1 - 01$		
3	his orgalism		
7	KATHLEEN M. GONZALEZ		
)	Respondent		
1			
2	I have read and fully discussed with Respondent Kathleen M. Gonzalez the terms and		
3	conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I		
1	approve its form and content.		
5	DATED:		
5	JEFFREY S. KRAVITZ		
	Aptorney for Respondent		
-	• · · · · · · · · · · · · · · · · · · ·		

1	<u>ACCEPTANCE</u>		
2	I have carefully read the above Stipulated Settlement and Disciplinary Order and have full		
3	discussed it with my attorney, Jeffrey S. Kravitz. I understand the stipulation and the effect it wil		
4	have on my Registered Nurse License. I enter into this Stipulated Settlement and Disciplinary Order		
5	voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the		
6	Board of Registered Nursing.		
7	DATED:		
8			
9	KATHLEEN M. GONZALEZ		
10			
11			
12	I have read and fully discussed with Respondent Kathleen M. Gonzalez the terms and		
13	conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order		
14	I approve its form and content.		
15	DATED:		
16			
17	JEFFREY S. KRAVITZ Attorney for Respondent		
18	Attorney for Respondent		
19	<u>ENDORSEMENT</u>		
20	The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted		
21	for consideration by the Board of Registered Nursing of the Department of Consumer Affairs.		
22	DATED: 3-2-64		
23	BILL LOCKYER, Attorney General of the State of California		
24	\neg m \circ		
25	JESSICA M. AMGWERI		
26	Deputy Attorney General		
27	Attorneys for Complainant		
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Exhibit A
Accusation No. 2004-61

1	BILL LOCKYER, Attorney General		
2	of the State of California JESSICA M. AMGWERD, State Bar No. 155757		
3	Deputy Attorney General California Department of Justice		
4	1300 I Street, Suite 125 P.O. Box 944255	•	
5	Sacramento, CA 94244-2550 Telephone: (916) 445-7376 Facsimile: (916) 327-8643		
6	Attorneys for Complainant		
7	-		
8	BEFORE THE BOARD OF REGISTERED NURSING DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
9			
	STATE OF CAL	TORNA	
11		l Case No. 2004-61	
12	In the Matter of the Accusation Against:	Case No. 2004–61	
13 14	KATHLEEN M. GONZALEZ 566 W. Sample Avenue Fresno, California 93704	ACCUSATION	
15	Registered Nurse License No. 443873		
16	Respondent.		
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18	Complainant alleges:		
19	<u>PARTIES</u>		
20	1. Ruth Ann Terry, M.P.H., R.N. (Complainant) brings this Accusation		
21	solely in her official capacity as the Executive Officer of the Board of Registered Nursing,		
22	Department of Consumer Affairs.		
23	2. On or about August 31, 1989,	the Board of Registered Nursing issued	
24	Registered Nurse License Number 443873 to Kathleen M. Gonzalez ("Respondent"). The		
25	license was in full force and effect at all times relevant to the charges brought herein. The		
26	license will expire on June 30, 2005, unless renewed.		
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STATUTORY PROVISIONS

- 3. Section 2750 of the Business and Professions Code ("Code") provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.
- 4. Section 2761 of the Code states, in pertinent part, that the board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for unprofessional conduct.
 - 5. Section 2762 of the Code states:

"In addition to other acts constituting unprofessional conduct within the meaning of this chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this chapter to do any of the following:

. . . .

- (e) Falsify, or make grossly incorrect, grossly inconsistent, or unintelligible entries in any hospital, patient, or other record pertaining to the substances described in subdivision (a) of this section."
- 6. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

7. DRUGS

"Demerol," a brand of meperidine hydrochloride, a derivative of pethidine, is a Schedule II controlled substance as designated by Health and Safety Code section 11055(c)(17).

"Percocet," a brand of oxycodone, is a Schedule II controlled substance as designated by Health and Safety Code section 11055(b)(1)(N).

"Percodan," a brand of oxycodone, is a Schedule II controlled substance as designated by Health and Safety Code section 11055(b)(1)(N). Each tablet contains 4.50 mg. oxycodone hydrochloride, 0.38 mg. oxycodone terephthalate, and 325 mg. aspirin.

FIRST CAUSE FOR DISCIPLINE

(Falsified, Made Incorrect or Inconsistent Entries in Hospital or Patient Records)

8. Respondent is subject to disciplinary action under Code section 2761(a) on the grounds of unprofessional conduct as defined in section 2762(e) of the Code in that on or about September 10, 2001, through September 28, 2001, while employed as a licensed registered nurse at Community Medical Center, Clovis, California, Respondent falsified, made grossly incorrect, grossly inconsistent or unintelligible entries in hospital or patient records in the following respects:

Patient #00-13-96-52/Account #106556499:

- a. On or about September 10, 2001, at 11:43, Respondent signed out two (2) Percodan tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes and failed to note any wastage of the medication.
- b. On or about September 10, 2001, at 18:17, Respondent signed out two (2) Percodan tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes and failed to note any wastage of the medication.
- c. On or about September 11, 2001, at 17:24, Respondent signed out two (2) Percodan tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes and failed to note any wastage of the medication.

Patient #01-33-01-81/Account #106578546;

d. On or about September 21, 2001, at 08:58, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, failed to note any wastage of the medication and the signing out for the administration was inconsistent with physician's orders which did not call for the administration of that medication. The administration of this medication would have caused the patient to overdose and probable death.

Patient #01-32-98-37/Account #106575249:

e. On or about September 21, 2001, at 17:48, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, failed to note any wastage of the medication and the signing out for the administration was inconsistent with physician's orders which did not call for the administration of that medication. The administration of this medication would have caused the patient to overdose and probable death.

Patient #00-88-76-01/Account #106554085:

- f. On or about September 21, 2001, at 08:00, Respondent charted the administration of two (2) Percocet tablets on the patient's medication administration record, however, Respondent did not sign out medication for administration.
- g. On or about September 21, 2001, at 18:05, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but inconsistently or incorrectly charted the administration at 17:15 on the patient's medication administration record, and failed to chart the administration in the nursing notes.
- h. On or about September 22, 2001, at 08:35, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, and failed to note any wastage of the medication.
- i. On or about September 22, 2001, at 11:45, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but inconsistently or incorrectly charted the administration at 11:30 on the patient's medication administration record, and failed to chart the administration in the nursing notes.
- j. On or about September 22, 2001, at 17:21, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, failed to note any wastage of the medication and the medication was signed out for administration after the patient was discharged.

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Patient #01-01-76-80/Account #106436893:

k. On or about September 21, 2001, at 19:13, Respondent signed out two (2) Percocet tablets from the Pyxis machine, charted the administration on the patient's medication administration record on September 19, 2001, at 19:00, and failed to chart the administration in the nursing notes.

Patient #00-85-07-72/Account #106585353:

- 1. On or about September 25, 2001, at 10:14, Respondent signed out two (2) Percocet tablets from the Pyxis machine, charted the administration on the patient's medication administration records, but failed to chart the administration on the nursing notes.
- m. On or about September 25, 2001, at 12:14, Respondent signed out one (1) 75 mg. syringe of Demerol from the Pyxis machine, charted administration of 50 mg. at 16:00 on the patient's medication administration record, but failed to note any wastage of the medication and the signing out for the administration was inconsistent with physician's orders which called for 50 mg. Demerol.
- n. On or about September 25, 2001, at 12:23, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, and failed to note any wastage of the medication.
- o. On or about September 25, 2001, at 14:36, Respondent signed out two (2) Percocet tablets from the Pyxis machine, charted the administration on the patient's medication administration record, but failed to chart the administration on the nursing notes.
- p. On or about September 25, 2001, at 15:56, Respondent signed out two (2) 25 mg. syringes of Demerol from the Pyxis machine, charted administration at 19:00 on the patient's medication administration record, but failed to chart the administration in the nursing notes.

q. On or about September 25, 2001, at 16:21, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, and failed to note any wastage of the medication.

- r. On or about September 25, 2001, at 18:57, Respondent signed out two (2) Percocet tablets from the Pyxis machine, charted the administration on the patient's medication administration record, but failed to chart the administration on the nursing notes.
- s. On or about September 26, 2001, at 08:16, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, and failed to note any wastage of the medication.
- t. On or about September 26, 2001, at 11:11, Respondent signed out two (2) Percodan tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, failed to note any wastage of the medication and the signing out for the administration was inconsistent with physician's orders which did not call for the administration of that medication.
- u. On or about September 26, 2001, at 14:17, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, and failed to note any wastage of the medication.

Patient #01-02-61-75/Account #106567447:

v. On or about September 26, 2001, at 17:30, Respondent signed out two (2) Percodan tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes, failed to note any wastage of the medication and the signing out for the administration was inconsistent with physician's orders which did not call for the administration of that medication.

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Patient #00-32-74-74/Account #106539769:

- w. On or about September 28, 2001, at 14:05, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes and failed to note any wastage of the medication.
- u. On or about September 28, 2001, at 15:18, Respondent signed out two (2) Percocet tablets from the Pyxis machine, but failed to chart the administration on the patient's medication administration record, failed to chart the administration in the nursing notes and failed to note any wastage of the medication.
- x. On or about September 28, 2001, at 17:15, Respondent signed out two (2)

 Percocet tablets from the Pyxis machine, charted the administration of the medication on the patient's medication administration record, but the patient denies receiving that medication.

SECOND CAUSE FOR DISCIPLINE

(Unprofessional Conduct)

9. By reference, paragraph 8 is incorporated herein. Respondent is subject to disciplinary action under Code section 2761(a) on the grounds of unprofessional conduct in that on or about September 10, 2001, through September 28, 2001, while employed as a licensed registered nurse at Community Medical Center, Clovis, California, Respondent charted wrong dates, times and columns on patient records, as set forth in paragraph 8 above.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

- 1. Revoking or suspending Registered Nurse License Number 443873, issued to Kathleen M. Gonzalez;
- 2. Ordering Kathleen M. Gonzalez to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3;

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4	3. Taking such other and further action as deemed necessary and proper.
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2	DATED: 9905
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4	P. En Donate
5	RUTH ANN TERRY, M.P.H., R.N. Executive Officer
6	Board of Registered Nursing Department of Consumer Affairs State of California
7	State of California Complainant
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9	SA2003101069 Accusation (kdg) 7/7/03
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